## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

104274501

			SMALL ENTITY TYPE ( )			OTHER THAN OR SMALL ENTITY						
TOTAL CLAIMS			(Column 1)			umn 2)		RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	<del> </del>	OR	BASIC FEE	
TO	OTAL CHARGE	ABLE CLAIMS	20 minus 20=					X\$ 9=		1	X\$18=	
INI	DEPENDENT C	LAIMS	7 minus 3 =		*				<del> </del>	OR	<u> </u>	
⊢		NDENT CLAIM P						X43=	<del> </del> -	OR	X86=	. —
								+145=		OR	+290=	_
* (1	tne difference	e in column 1 is	less than z	ero, enter	"0" in	column 2		TOTAL		OR	TOTAL	774
	C	(Column 1)	MENDE	(Colum	nn 2)	(Column 3)		SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
L	FIRST PRESE	NTATION OF MI	ULTIPLE DE	PENDENT	CLAIM			+145=			+290=	
							L	TOTAL		OR	TOTAL	
(Column 1) (Column 2) (Column 3)								DDIT. FEE		OR,	ADDIT. FEE	
		CLAIMS	T -	HIGHE		(Column 3)	lr	·	4001	ſ	- 1	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	٠.	OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
		•					L	+145=		OR	+290=	•
			Al	TOTAL DDIT. FEE	لِـــــــــــــــــــــــــــــــــــــ	OR ,	TOTAL ODIT. FEE					
_		(Column 1) CLAIMS		(Columi		(Column 3)		٠, ٠		_		
AMENDMENT C		REMAINING AFTER AMENDMENT	·	NUMBI PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	***		= '		X43=			X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-			OR	700-	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR L	+290=	·
** If	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT, FEE	
T	he "Highest Num!	nber Previously Paid ber Previously Paid	For" (Total or	o SMACE is I Independen	ess thar t) is the	i 3, enter "3." highest number		DIT. FEE L.	opriate box			